

Conduct Disorder

Description

According to the DSM-5 (2013), essential features of conduct disorder are "a repetitive and persistent pattern of behavior in which the basic rights of others or major age-appropriate societal norms or rules are violated." It is important to differentiate occasional emotional outbursts that may be reactions to specific events from conduct disorders. The differentiating factor is that a person with conduct disorder has a consistent, persistent pattern of these behaviors.

These behaviors fall into one of four general categories:

- Aggression to people and animals
- Destruction of property
- Deceitfulness or theft
- Serious violations of rules

The disturbance in behavior causes clinically-significant impairment in social, academic or occupational functioning.

According to the DSM-5 (2013), conduct disorder is generally diagnosed as one of two types: the "Childhood Onset Type", and the "Adolescent Onset Type," depending on when the behaviors began to emerge.

Gender Differences

Prevalence rates for conduct disorder are higher for males than females.

The expression of conduct disorder behaviors is different between genders. Males tend to exhibit more physically-aggressive behaviors, such as physical fights, use of weapons to physically harm others and physical cruelty. Females with conduct disorder are more likely to exhibit aggression through social intimidation, social cruelty, running away and staying out overnight despite parental prohibitions, truancy or other nonphysical behavioral expressions.

Causes

Research indicates that conduct disorder-related behaviors may be caused by either environmental conditions or genetic pre-disposition, or a combination of both.

Parental History

Parents with a history of alcohol dependence, mood disorders, schizophrenia and biological parents with a history of Attention Deficit Hyperactivity Disorder or conduct disorder have an increased chance of having children with conduct disorder.

Environmental Influences

Children who have been physically or sexually abused are more likely to exhibit aggressive, antisocial or conduct-related behavior problems. Parents who use coercive means to manage children's behavior are more likely to have children who display externalizing behaviors (i.e. aggression, acting out, disruptive behavior in school) and coercive behaviors.

Parental neglect is also a risk factor for the development of externalizing behaviors, including conduct disorder symptoms.

Associated Conditions

There are several known associated correlates to the development of conduct disorder. Although they are distinct disorders, Oppositional Defiant Disorder is frequently a precursor to conduct disorder. Attention Deficit Hyperactivity Disorder is also frequently found in histories of adolescents with conduct disorder. Persons with conduct disorder have a higher-than-expected chance of having a co-existing learning disability.

Treatment

Early intervention is important for parents of children with aggressive, destructive and defiant behavior. Conduct problems often persist into adolescence and beyond, especially when serious symptoms appear in childhood.

Parent training, specifically designed for defiant and coercive behavior problems, can be an effective intervention. It is important that therapy strategies be adaptable to the child's natural environment. Therefore, engaging parents and school staff in learning effective strategies for managing the child's behaviors is often critical to success. Strategies could include providing a stable environment with predictable consequences for behavior and anger management.